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THE EXPANDING DEMANDS FOR WAR RELIEF
IN EUROPE

BY PAUL U. KELLOGG,

Editor of The Survey.

A recent Red Cross bulletin tells of food distributed (as a measure of preventive medicine), to supplement the school luncheons of 30,000 Paris school children. In one ward, the supplement was given in the shape of a mid-afternoon "gouter" of chocolate, and a "specially and scientifically compounded Red Cross bun," made from American sugar and white flour and French milk. Apply the recipe if you will to war relief: American good-will and resources and French self-help,—or Italian, or Belgian self-help. For, in any consideration of war relief on the western front, it must always be borne in mind that the great burden of it is not shouldered by outside agencies or even by the governments concerned, although that is the greater of the two,—but most of all by the people themselves.

At every stage, American help has had to adjust itself to existing institutions, points of view and habits. It has had to adjust itself to rapidly changing situations, resulting from military events. It has built up staffs piecemeal and drawn supplies mostly from sources 3,000 miles away and through uncertain and restricted channels of transportation. These things add to our enthusiasm, at cables telling of squads of Red Cross workers hurdling obstacles and serving the stream of refugees from the recent German offensives. These things must be borne in mind in any attempt later on, to pass judgment on the execution of the American Red Cross as a whole. At this juncture, there is no independent and inclusive body of facts as to the actual working out of Red Cross operations in the last twelve months which would enable a person to pass such judgment. Rather, we are in the position of laymen at the outset of a health campaign for the eradication, for example, of an infectious disease. We turn to the physicians and sanitarians and ask: "What is it you need to accomplish results?" And we can hold them responsible for results in so far as we give them the means, the equipment and the personnel which they say they need. That, is the attitude of the American public to the great overseas work of the American Red

Cross. We have confidence in many of the men who have been called to the service,—experienced in executives, transportation and purchasing, in medicine and engineering, in relief and child welfare and other phases of social work; we have supplied the War Council with such a relief fund as the world has never known; we recognize that the Red Cross has been handicapped, as has the army, in the matter of tonnage; we know that until this last month it was further handicapped by the short-sighted masculine army order that trained persons, nurses or social workers could not go overseas if they were women and had brothers in the service.

Because of these things, or in spite of them, we shall expect results. But what sort of results? And it is just here that the progress of medical and social work within the last thirty years, has tremendously broadened the base of our expectations and of our judgment; just here that the statements, the monthly reports and publicity matter issued by the Red Cross at Paris and Rome and Washington give us confidence that in conception, no less than in mass, American war relief is to prove as great a development over the standards of, for example, Spanish War days as has been the development in fighting weapons.

What some of these new conceptions are, how far they are drawn from the advances and inventions of peace times, will be clearer if we relate certain great phases of war relief to domestic developments. The historic field service of the Red Cross is the care of the sick and wounded. There is practical military justification for such service, although the professional militarists of Europe fought it until the Sanitary Commission in our Civil War carried conviction, that such field service is not an interference with battle. Rather it salvages an increasing number of casualties; it removes the dread of neglect which more than the fear of death may prey on the minds of the troops. Our medical and military observers, returning from the Balkan wars, held that this service was too essential to be left in the hands of any private agency; and it has since become with us an army function. From the stretcher bearers back to the base hospitals, the army medical department is charged with the care of the sick and wounded; and while the American Red Cross organizes and equips the base hospital units, these are mustered in as part of the military establishment.

This has relieved the Red Cross of its chief historic burden; it

has also, in a sense, thrown open to the Red Cross a wider opportunity for service as auxiliary to the army medical department—through installing rest stations and infirmaries on lines of communication, recuperation stations back from the war zone, neighborhood dispensaries in army villages, diet kitchens and homes for nurses, auxiliary plants for the manufacture of anaesthetics, ice and splints; and through building up great reserves of emergency supplies of everything from a bandage to a mobile hospital. The head of the Military Affairs Department of the American Red Cross in Paris wrote last January:

Today we must look forward six months and calculate the needs of an army fighting in summer weather, while at the same time we must supply the winter needs of the soldiers at the ports of entry, on the American army lines of communication, in the training camps and at the hospitals. We are the army's emergency depot. If the army wants splints or dressings or magazines for our recreation huts, diet delicacies—any number of a hundred different things—we supply them in the natural course of the day's work. But beyond that we must be supplied with vast stocks of material in the right quantities and of the right kind to meet the unexpected.

In everything human, somebody's guesses go wrong, and the outstanding justification of this Red Cross procedure as a medical army of reserve, is the plight in which earlier in the war the British would have been in the near East, had the British Red Cross not built up at Malta great reserves for the army medical service to fall back upon.

Since the Red Cross took them over last summer, the hospital supply and surgical dressings services, which today serve both French and American hospitals, have been doubled and trebled in capacity. In the course of the first six months, the monthly output of the former had increased from 2,826 bales sent to 1,116 hospitals to 4,740 bales sent to 1,653 hospitals. Not a little of these supplies are drugs or instruments difficult to obtain or not on the regular army lists. Similarly last fall, the American Army Division of the Red Cross investigated a wide range of mobile plants and blocked out plans for operating experimental units under a "ravitaillement" service. These included portable kitchens to supply hot food to the wounded back of the casualty clearing stations, portable ice plants to supply hospitals with ice packs and refrigerated foods, portable laundries to serve field hospitals, portable sterilizing plants for serving surgeons at advanced dressing stations, dental and ophthalmolog-

ical ambulances and the like. There should be the same pressure upon the army medical department to keep abreast of the most advanced equipment in such directions, as upon the air service to keep abreast of plane and motor development. But as a foraging and demonstrating agency, more flexible than the military establishment, the Red Cross has a very real function.

What is missing, or out of reach, or emergent, or new, or out of routine, or experimental in medical and surgical equipment and practice is, in truth, a special charge upon the forethought and ingenuity of the Red Cross, relieved as it is of the main burden of care for the sick and wounded.

Let me cite two further illustrations in which the Red Cross has pushed to an outer belt of service. At one of its three military hospitals, in or near Paris, a corps of bacteriologists has been at work studying the causes of trench fever. It has organized a research society, subsidized individuals to investigate surgical problems and set going a medical and surgical information service. This brings the isolated army doctor or surgeon promptly in contact with the experience of his fellows facing similar problems and with the experience of the French and British profession.

The second illustration is the dispensary service instituted in the region where American troops were first quartered. The health of the men was seen to be bound up in the health of the countryside. Most of the local doctors had long since been called out of civil practice and had gone into the French army. For example, but eighteen physicians were found in a district which before the war had employed a hundred, and these eighteen were aged men. Where American troops were encamped near by or were billeted in the villages, these dispensaries opened their doors to the neighboring people and district nursing was instituted. Under the genito-urinary service of the army medical department, a special corps of army physicians was assigned to the Medical and Surgical Division of the Red Cross, which itself supplied the nurses, motors and equipment. Each motor unit made up of one doctor and two nurses was assigned to a route of villages, much after the manner of a rural mail delivery. Concern for community conditions (as distinct from camp activities such as carried on by the Y. M. C. A. and the Knights of Columbus), early led to the development of the war camp community service on this side of the water. There is need for its pro-

jection to France. In the meanwhile this little constellation of forty dispensaries, centering at Neufchateau in the first American army zone, was a recognition that sick soldiers are more than patients; they are human beings with a matrix of life and human relations which has to be reckoned with by the doctor in uniform or by any one who would successfully deal with them. It was the same revolutionary change in outlook which lies back of the rise of hospital social service in American cities. To cure a patient in a bed is of no practical use if he goes back to the same tenement conditions that made him sick or under the same workshop stress that broke him. Frayed spirits and worried minds, we have come to see, no less than germs and wounds, lay men up and impair their fitness. And in our schemes for recreation, our health campaigns and social reform movements affecting food and environment, we set out to prevent these things.

The recreational work of the Y. M. C. A. is described elsewhere in this number. But two phases of Red Cross work should be noted here, which are a radical expansion from its historic succoring of sick and wounded, but which by the analogies just suggested, will be seen to be kin in the same way that a modern health department is kin to a primitive hospice.

One is that development of the home service of the Red Cross at Washington, which is placing representatives with the American army units abroad, through whom the soldier who is worrying about his family can have direct word from a friendly visitor in his home town and can go at his soldiering knowing that help is within reach in case of trouble. This is a modern application to states of mind of the more customary bedside work of letter-writing for the sick and wounded.

The other development is that of the canteens of the French army division of the Red Cross. Something like three million men were fed in the canteens at the Paris terminals in the four fall months. Twenty thousand soldiers a day were being served at canteens located on junction points on the lines of communication. Before these last were opened, troops on "permission" not infrequently had to spend hours waiting for trains to take them home, without means for rest or food or shelter in case of rain. Such junction points were poor stepping stones from the trenches to the homes of France; such men, tired, dirty, hungry, infested with trench vermin, were poor

emissaries. Hot meals, sleeping quarters, wash rooms, clean linen, writing rooms—these make up the new stepping stones. In addition, 700,000 rations had been served up to January 1 by rolling canteens, each manned by an American and French convoyer. A French major in command of an advanced post 400 yards from the German lines attributed the fact that there was no sickness in his battalion to these canteens. The men went in by companies to a marshy wood where the water prevented them from digging in deep. The canteen workers carried in kettles of bouillon and chocolate which could be heated up over small fires; and the food and warmth forefended against the effects of the wet and winter.

Thus it would appear that had this war been like other wars—like such wars as England has known in the past, for example, with expeditionary forces sent overseas and the course of home life proceeding much as usual—the scope of Red Cross work would nevertheless have had to be expended and socialized. But, of course, war itself has changed, or rather, tendencies which manifested themselves in our Civil War and the Franco-German War of the 'Seventies have come to dominate. While with us, in our second year, many of the characteristics of the expeditionary war still hold, with the continental nations those characteristics have long since given way to others. Whole peoples are fighting; in a very real sense it is a struggle of nations. And, as the greatest charge upon Red Cross energies and resources, comes civilian war relief.

Several causes have entered into this American development, so distinctive from that of the British Red Cross, which clings much more closely to its task as adjunct to the military arm. Since the San Francisco earthquake, the Red Cross had become our national agency for disaster relief in the case of cyclones, floods and fires. Even this past year, and all but unheralded, our American body has been doing a remarkable work in aid of the Chinese flood sufferers, at the same time that it has been projecting its great war-time undertakings on the western front. Again, in our long period of neutrality, American sentiment and desire to help naturally found expression in scores of war relief organizations operating notably in France. When the American Red Cross commission first reached Europe, it was found that the American army itself was prepared to take over the care of the sick and wounded, and that the Y. M. C. A. proposed to hold fast to the recreational and related activities

among the soldiers, which it had carried on so successfully on the Mexican border. It was clear that months would elapse before American troops would be in France in such numbers as to employ the resources and staff which the Red Cross could bring to bear, even if these phases of work were not closed to it. At the same time it was increasingly clear, that throughout all of these months, there was pressing need to carry home to the Frenchman in the street and in the ranks the fact that America was with them.

A similar call came in the weeks following the invasion of Northern Italy last October when to spread a single blanket more in an "asilo" or stick up a flag at a station counted incalculably. The American men and women on the ground, who for two and three years had been putting in unstinted time and effort on existing war relief agencies, were eager to persuade the incoming Red Cross administration as to the opportuneness of this civilian work, on military no less than on humanitarian grounds. More than that, the commission was fortunate in mustering to its service by early fall, a group of trained executives in social work who scored a series of definite accomplishments on this civilian side, which carried conviction both at home and in the minds of the French public. In the recent weeks of counter-offensive American troops have played an increasing and stirring rôle on the western front. In the earlier weeks of strain the German drives were stemmed and held. The work which the American Red Cross and other agencies had carried on among French troops and French civilians throughout the fall and winter, was a very definite element in building up that resistance in war zone and provinces alike on which hung the fate of the republic.

But while these considerations entered into the decisions which made for Red Cross war relief development, the major and governing one, after all, was the fact already referred to: namely, that not armies alone but whole peoples were in the struggle. Back from the battle-fronts have come not only streams of sick, wounded and gassed soldiers, but streams of civilian refugees. Their hunger and thirst, their infirmity and distress have cried out for help which could not be gainsaid. Their helplessness has been also a source of military embarrassment; their health and salvage a source of national strength.

In his little summary of "The Red Cross on the Front Line

in the Great Battle of 1918," Edward Eyre Hunt, chief of the Bureau of Reconstruction and Relief of the American Red Cross, Paris, draws a picture of such a stream of civilians last March:

From the human side the evacuation is, and always will be, indescribable. It was a vast lava flow of men, animals, and materials. Every little country road and every highway was jammed with the endless lines of camions moving back off the aviation camps, pulling out immense guns, salvaging military supplies of all sorts, and at the same time removing the civilians and their little possessions. The immense importance of the agricultural work in the devastated district, was symbolized by the presence of batteries of American tractor plows, shuffling along in the midst of convoys of camions, and by the yokes of oxen or teams of horses pulling out Brabant plows, drills, cultivators, disk harrows, reapers and binders. Civilians came away in every conceivable vehicle, in wheelbarrows, in baby-carriages, in little dog-carts, in farm wagons; but most of them came on foot, walking in the ditches besides the long lines of troops. Roads were as dusty as in midsummer. Every tree, every blade of grass by the wayside was white with the fine powder churned up by innumerable wheels and feet.

The refugees in their weak misery, and the soldiers in their stout-hearted calm passed each other on the roads; the one moving forward to stop the invaders, the other fleeing back to where they were shortly stopped by their new friends, men and women whom they had come to trust—the workers of the American Red Cross and its affiliated societies. It was like some mediaeval pageant, for the weak and the strong, the dazed and the keen all bore spring flowers, yellow daffodils or pale anemones, which they gathered as they went along.

The American workers who had been engaged in the devastated region, now for a second time become a great battlefield, deployed all manner of vigorous aid to these folk. Motor trucks and Fords were set going as a "dry land ferry service," carrying the aged, the women and children back to the bridges over the River Somme. Canteens were set going at cross roads and rail heads; food and medical aid given out to the fugitives on their way to Paris and thence to points of refuge.

This was the second of the great emergencies of the sort in which the American Red Cross has functioned since the United States' entry into the war. The first was that in Italy, last fall, before the permanent Red Cross commission to Italy had started from the United States, and when a temporary force of executives was dispatched to Rome from the French organization. In France this spring—in Picardy, in the country back of the Flanders front, and later in the region of the Marne, the Red Cross for the first time was on the field, with rolling stock and warehouses, medical and re-

ief workers, when the crises broke. While primary responsibility had to rest with the resident military and civil officials, there are many indications that, in promptness, vigor and adaptability, this American help was of the sort which we have come to expect from the Red Cross in times of domestic disaster. In gathering up broken families and getting them to safety, the work was analogous to such emergent disaster relief.

There has been another stream of war refugees less spectacular less emergent, but in other respects not less heart rending, which the Red Cross has dealt with since last December. These are the "rapatriés"—or fugitives from the regions of occupied France transferred by the German Government to Switzerland, thence sent to the clearing station at Ebian. Prior to the March offensives, a convoy of six hundred "rapatriés"—those who had neither friends nor relatives to receive them—left the frontier each day to be housed in some one of the departments of France. Since last fall, the Red Cross through its children's bureau has aided in the medical examination and care of the incoming little folk at Ebian. In fifteen weeks, 34,228 children were examined. Last December the French Government asked the American Red Cross to assist in the reception of the "rapatriés" at the point of placement, and this soon became a first charge of the Bureau of Refugees and Relief which by April first, was represented in fifty-eight of the seventy-six uninvaded departments of France. Seven thousands "rapatriés" were thus aided in January, most of them industrial discards whom Germany had returned because they could do little work—old women, women with little children, and children under fifteen. The Red Cross delegates have helped in the extremely difficult task of placing them in industries where they could become self-supporting, in bettering housing conditions, and furnishing food, clothing and furniture, which last is paid for by the refugees on the instalment plan. By arrangement with the French Government, American coal was turned over to the French Ministry of Armaments at an Atlantic port, and its equivalent was withdrawn by the Red Cross delegates in small amounts from the local reserve stores in the departments. Thus fuel could be obtained quickly for these new households. This whole service was, of course, turned to immediate use when trains of refugees from the war zone were sent down this spring to the departments of the south and east.

Here, if one were looking for an analogy in American social work, it would be that of the immigrant aid societies which have helped incoming families to get a foothold in our American towns and cities only. Following the invasion of Northern Italy last fall, the Red Cross promoted similar work through its system of regional representatives, and interestingly enough, coöperated in several cities with a voluntary agency which had originally been created to help emigrants—the Umanitaria.

The month following the invasion, a Red Cross committee of three made a tour of the peninsula from the Piave line to Sicily to explore this problem of settlement of refugees in the cities and countrysides of a war beset nation. It brought forward a constructive program for refugee work based on French experience, covering such factors as furniture, health, employment, and protection, through which the Red Cross might coöperate in preventing the crystallization of those abnormal living conditions which may be worse in their consequences than the more spectacular flight from home. To quote a paragraph which will show the general approach of the committee:

We find refugees living in hotels, hospitals, convents, schools, all kinds of converted buildings, some admirable as far as physical comfort is concerned, others leaving much to be desired even in this respect. This manner of life is one which should be ended as soon as possible. Even if clean and warm and commodious, they seldom afford possibility for a normal home life, for privacy, for natural employment. In one city, for example, some four hundred men, women and children were living in the wards of a hospital under conditions as institutionalized as those of an almshouse, as promiscuous as those of the steerage of an ocean liner. . . .

Of course the worst conditions are not to be found in the refugees but in overcrowded rooms in private tenements or in old and filthy hotels. We have frequently seen eight or ten, and in one instance as many as fifteen persons in a single living-room and it is an urgent part of the housing problem to enable such families to move from their congested and insanitary "furnished" rooms into decent dwellings. We must bear in mind that the refugee families have in many instances been accustomed to very much higher standards of living than those even of the self-supporting working people in the communities where they now are. Many of them own property and all of them household goods which they have had to leave behind. They are in the position of people who have lost everything by a fire or a flood. They are not in danger of being injured by prompt and generous assistance in such an emergency. They are in grave danger of demoralization and injury from being left in their destitute condition without employment, without privacy and wholesome atmosphere of family life, and without

the social environment of the neighborhood, to which they have been accustomed. The best form of relief, therefore, would seem to be assistance with furniture such as would enable them to take suitable accommodations in a place where by their own labor, supplemented by the government allowances, they can become self-supporting. To make good some part of their war losses in this way, would be analogous to social insurance.

In France, public and private agencies, French and American, have long been dealing with this resident refugee problem. Even before the repatriations of the fall and winter and the evacuations of this spring, the numbers involved were staggering. The total of French and Belgian refugees in 1918 was placed, roughly, at 1,500,000, of whom between eight and nine hundred thousand were so destitute that they had received government aid either in the form of transportation or the monthly allocations. Since the refugees are mainly women and children and invalid men, and since many of the families have no able bodied workers at all, the allowance from the government and from existing French agencies has been supplemented in many cases out of American Red Cross funds. The level of life under what are practically exile conditions is difficult at best, but the effort has been to attack certain vulnerable points where inertia could be overcome and regenerative forces within the families could assert themselves. Health conditions have been attacked through special dispensaries and health centers for refugees.

In the cities and towns of the provinces, as in Paris, [wrote Edward T. Devine in outlining the work of the Bureau], the greatest single blessing that can be conferred will be to move as many as possible of the "refugee" families from the so-called furnished rooms into houses or apartments in which the living conditions will be more tolerable, the overcrowding and the danger to health less, and the moral atmosphere more like that of the normal French family before the war. The essentials are dwellings, furniture and fuel. It is not a question of permanent support but of a substantial lift to enable the largest possible number of families to be re-established in something like a normal household life. Barracks erected wholesale would not solve the problem. The people must live sufficiently near their work and where the children can obtain an education. However inexpensive, the apartment should be decent and even, if possible, attractive. Only by such means can the depression and discouragement which are the inevitable result of three years' physical hardship, accompanied nearly always by repeated bereavement and long-continued anxiety, be in some degree lessened. Only in such ways can American generosity take up its appropriate and modest share of the accumulated misery and anguish of the three years of war in France.

The matter of housing has been approached from still another angle. Following the lead of an able Frenchwoman who had

taken houses that were only partially constructed when the war broke out, finished them, furnished them, and installed some 3,000 families, the bureau last fall made a census of unfinished apartment buildings in Paris, and thereupon made arrangements with various French refugee and housing organizations for the completion of buildings to house 5,000 persons. In all cases the Red Cross provided furnishings; in most, it made advances to cover the cost of the final stages of construction;—sums which will be repaid later from rentals. At Havre, a seaboard town, where 50,000 additional people have come since the outbreak of the war, but where there has been no house building whatever in that interval, the Red Cross through its Commission for Belgium appropriated money for the erection of a temporary village for Belgian refugees.

But it has of course been in the war zone itself, and especially in what was called the liberated area—the region evacuated by the Germans in March 1917 only to be the scene of fresh offensives this spring—that the Red Cross had broached the further and more permanent problem of rehabilitating families not in the cities that harbored them, but in their own villages and countrysides. The war zone had been divided into six main districts: warehouses were stocked, district agents placed and American and French “oubres” supported in giving out work and supplies, patching roofs and stables for the winter, plowing land and the like. The French Government was itself engaged in the largest tasks of barrack building and cultivation. But in the six months ending January 1, the Red Cross had shipped some 40,000 articles to the devastated area, from pumps to clear polluted wells to window glass to repair damage done by air raids. This work fell under its Bureau of Reconstruction and Relief, and is a forecast of the first steps toward the reconstitution of civilian life once invaders are gone from northern France. As a matter of fact, actual loss in Red Cross equipment or building this spring was small, for little more than temporary patch-work had been attempted by its own repair crew or by its affiliated organizations such as the Friends’ Unit. Relationships had however, been established with people which counted tremendously at the time of the drive, and which will be invaluable in the period of reconstruction to follow.

A field worker is quoted as saying:

When the material works were lost, the best of all remained, that best which, after all, was the inner purpose of it all. The influence of neighborliness, friend-

ship, kindness, sympathy—these are made of stuff that no chemistry of war can crush, any more than death can cut off the influence of a man's personality. We face half a year's work torn to pieces. Yet I believe the influence of our work will live in the lives of our French neighbors, and in our own lives. I believe the fact of the final sacrifice will deepen its effect

The cables told of the return of peasants around Chateau-Thierry in the very wake of the counter-offensive. In all such primitive work of rehabilitation, the Red Cross worker has been not so much the pioneer as the follower of the farmer or villager who is fired with the notion of getting back to home and land. And from one end of the western front to the other, this work of rehabilitation is, of course, shot through with harbingers of the new day of peace and reconstruction—of the free homes of a free people. The Belgians are planning alike the rehabilitation of towns and flooded land. On the Dutch border their King Albert Fund is gathering portable houses to be carried to the old sites as shelters for the first builders. The Venetians transported some of their groups of work people intact, so that they could be self-supporting economic units while Venice was in danger, and could resume their work-a-day life again on their return. There is a ferment in Italy among the peasants for agricultural and land reform. Government, employers and laborers in England speak in terms of reconstruction. But it is, of course, in northern France that that term had its most excruciating meaning.

The part which the American Red Cross can and will be able to play in permanent reconstruction remains to be seen. But its sequence to the phases of war relief which have been described, once the currents of the refugee families are turned back to the stricken countrysides, needs no demonstration. And its appeal to the imagination of America, and through the imagination, to the heart and pocket-book, is such as should warrant the Red Cross in its planning of a post-war work as vigorous and meaningful as that which it has engineered while the war is on. A beginning has been made in assigning George Ford, formerly expert of the New York City Planning Commission, to the Red Cross Department of Civil Affairs, to co-operate with French authorities and to direct the part which the Red Cross will play in an educational campaign to improve houses and villages from a sanitary point of view without destroying the characteristic regional architecture. A public health administrator and a

practical agricultural director were to be added to the staff last spring; and word comes from France that with their indomitable spirit, the French architects and agriculturalists and officials continued their weekly meetings without break throughout the spring offensive.

But reconstruction is a matter of more than brick and mortar, fence and well. Reconstruction after the war may be too late. The regenerative and recreative processes are needed in France today if the future is to hold not only safety but life and the fullness thereof for the people of the republic. And here enters in the far-flung work of the Civil Affairs Department in conserving the childhood of France, in promoting health, and in working in other directions, which could be made the subject not of one but several articles very much longer than this. The Civil Affairs Department's budget for the six months ending April 30 last totaled 40,548,658 francs and the staff under the directorship of Homer Folks included 738 persons operating at 120 towns and cities of France and at nine points in the war zone. Eight civilian hospitals and forty dispensaries and dispensary stations were in operation. To follow its workers to their tasks it would be necessary to go to a dispensary in the roaring steel center of Saint Etienne; to a studio in the Latin quarter where life-like copper masks are made for "mutiles"; to the hen-coops and harness shops of the training farm at Chenonceaux; to a war zone village as a camion load of old folks leave it and as the shots from the machine guns patter in the streets; to Lyons, with a baby-saving show in full swing—necessary to go not only "somewhere" but "everywhere" in France. And this would leave out of consideration the corresponding development in Italy and in what remains of free Belgium under the parallel commissions,—all under the American Red Cross Commissioner to Europe.

For not only has Red Cross work broadened into war relief devised to succor, conserve and rehabilitate the fugitives from the war zone, but war relief has in turn broadened—as charitable relief in our own domestic life long since broadened—into a constructive program of social work and engineering. This program is one calculated to strengthen the fiber of the nation in stress, and to help make secure in its different way, as the armies are making secure on the battle field, the future of a race to whom democracy and civilization are so much in debt that without pretention or misunderstanding-

ing Americans can thus play their part in the household affairs of France.

A Frenchman of distinction, L. Chevrillon, French member of the Belgian Relief Commission, in interpreting the work of the American Red Cross to his fellow countrymen, said:

Above all, the work of the American Red Cross should intensify the natural current of sympathy which exists between France and America. . . .

It should be an institution not conducted merely from the point of view of intelligent relief or of proper management, but it should be also a great work of inter-penetration of the two nationalities. . . .

Taking into account the fact that France has had to sacrifice to military necessities and has had therefore to give secondary consideration to the relief of war sufferings, it will help with its capital, its men, its personnel, with the ability of its technical advisers and with the work of all its staff, all those institutions which have not been able to come to a complete development in the midst of the universal drama, which has brought them into being. It will hasten the solution of certain problems which appear to the French minds as still far distant. It will busy itself with the needs of orphans, children, the tuberculous, "refugees," "repatries." It will study the great problems of after-the-war, such as depopulation, rehabilitation of households, reconstitution of devastated areas, and in a general way will do its best to prepare a thorough and rapid renaissance of all the vital forces of the country.

BELGIUM AND THE RED CROSS—A PARTNERSHIP

By ERNEST P. BICKNELL,

Lieutenant-Colonel, American Red Cross, Commissioner to Belgium.

The Commission for Belgium, of the American Red Cross, has its headquarters at Sainte-Adresse, a suburb of Havre, France, which is the seat of the Belgian Government. The work of the commission is not limited by geographical lines, but is intended to assist Belgians, both military and civilian, wherever they are in need, either within free Belgium or in allied countries or neutral countries. It is to be recalled that the greater part of Belgium is held by the Germans, but that approximately 600,000 citizens of Belgium are refugees in England, France, Holland and Switzerland, where they are entirely cut off from home and from their ordinary and normal environment, resources, laws, customs and associates. These unhappy people are very widely dispersed in the countries